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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No.	:	10/625,809	Confirmation No.:	7768
Applicant	:	Cafferata, Robert		
Filed	:	July 23, 2003		
TC/A.U.	:	3739		
Examiner	:	Unassigned		
Docket No.	:	PA1309 CIP		
Customer No.	:	28390		
Title	:	<i>Method and System for Treating Vulnerable Plaque</i>		

INFORMATION DISCLOSURE STATEMENT UNDER RULE 1.56

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant(s) herein make available to the Patent and Trademark Office a copy of Form PTO-1449. This Information Disclosure Statement is being filed in accordance under 37 CFR 1.97(b)(3) Before the mailing date of a first Office Action on the merits. No fee is required. The Commissioner is hereby authorized to charge any additional fees which may be required under 37 C.F.R. 1.17, or credit any overpayment, to Deposit Account No. 01-2525.

The listed documents are brought to the Examiner's attention because they are known to the applicant and/or the applicant's attorney and may be considered by the Examiner to be material to his/her examination. This listing should not be construed as representation that a search has been made or that no better art exists. No inference should be made that the documents are in fact material merely because they are referenced herein. Moreover, no representation is made that any brief descriptions of the references herein necessarily describe the most material aspects of the references. Further, by this listing, the applicant is not making any admission regarding the relative dates of the invention and listed disclosures.

The Examiner is requested to consider carefully the complete text of these documents in connection with the examination of the above-identified application in accordance with 37 CFR 1.104(a). It is requested that the documents listed on the attached Form PTO-1449 be included in the "References Cited" portion of any patent issuing from this application (M.P.E.P. 1302.12), and that the Examiner initial and return a copy of the form to evidence consideration of the documents.

Dated: October 5, 2004

Respectfully submitted,

Michael J. Jaro
Michael J. Jaro
Registration No. 34,472
Attorney for Applicant

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PTO/SB/08A (08-03)

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Substitute for form 1449/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Sheet

of

Complete if Known

Application Number	10/625,809
Filing Date	July 23, 2003
First Named Inventor	CAFFERATA, Robert
Art Unit	3739
Examiner Name	Unassigned
Attorney Docket Number	PA1309 CIP

U. S. PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)			
	AA	US- 4,857,045	8/1989	Rydell	
	AB	US- 5,011,488	4/1991	Ginsburg	
	AC	US- 5,078,723	1/1992	Dance et al.	
	AD	US- 5,196,024	3/1993	Barath	
	AE	US- 5,665,062	9/1997	Houser	
	AF	US- 5,916,210	6/1999	Winston	
	AG	US- 6,099,499	8/2000	Ciamacco	
	AH	US- 6,203,537	3/2001	Adrian	
	AI	US- 6,224,590	5/2001	Daikuzono	
	AJ	US- 6,245,026	6/2001	Campbell et al.	
	AK	US- 6,346,116	2/2002	Brooks et al.	
	AL	US- 6,398,773	6/2002	Bagaoisan et al.	
		US-			
		US-			
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		US-			
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		US-			

FOREIGN PATENT DOCUMENTS

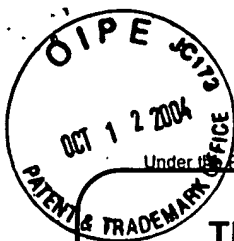
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
		Country Code ³ Number ⁴ Kind Code ⁵ (if known)				

Examiner
SignatureDate
Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 10/625,809

Filing Date July 23, 2003

First Named Inventor Robert Cafferata

Art Unit 3739

Examiner Name Unassigned

Attorney Docket Number PA1309 CIP

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Medtronic Vascular, Inc.		
Signature			
Printed name	Michael J. Jaro		
Date	October 5, 2004	Reg. No.	34,472

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Signature			
Typed or printed name	Kimberly Melvin	Date	October 5, 2004

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